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PTO/SB/17 (10-08)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/579,211-Conf. #6592
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	May 12, 2006
TOTAL AMOUNT OF PAYMENT		First Named Inventor	Toshihiko Shirasagi
		Examiner Name	A. L. Verderame
(\$)		Art Unit	1795
1,110.00		Attorney Docket No.	SON-3162

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 18-0013
Deposit Account Name: Rader, Fishman & Grauer PLLC	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Application Type	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)	
		Fee (\$)		Fee (\$)		Fee (\$)		
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES								
						Small Entity		
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)						52	26	
Each independent claim over 3 (including Reissues)						220	110	
Multiple dependent claims						390	195	
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
- or HP =		x	=		Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)				
- or HP =		x	=					
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)			
- 100 =	/50 =	(round up to a whole number) x		=				
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)		
Other (e.g., late filing surcharge): 1253 Extension for response within third month						1,110.00		

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,290/ 47,255
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			Date April 6, 2010